

Professor Contends Medical Schools' Standards Have

By LAWRENCE K. ALTMAN

Academic standards in the nation's medical schools have fallen in recent years because of the rise in the number of admissions of minority students with "substandard academic qualifications," a leading medical educator has charged in a scientific journal.

The author, Dr. Bernard D. Davis, a professor of bacterial physiology at Harvard Medical School in Boston, made his comments in an article in the issue of The New England Journal of Medicine published today.

Dr. Davis' article is one of the rare public statements about academic standards and minority group students, an issue that has generated private criticism from a growing number of teachers in the nation's 115 medical schools.

Dr. Davis cited an example of a young doctor who was recently awarded an M.D. even though the student had failed five times examinations that are usually prerequisites for the M.D. degree. The school, which was not identified, waived the requirement in granting the degree, Dr. Davis said.

Before an M.D. can practice civilian medicine, he must pass a set of examinations given independently of medical schools and approved by each state's licensing board. It is not known whether the doctor cited in Dr. Davis' article passed such licensing examinations.

Spokesmen for the military services said that, depending on the circumstances, unlicensed doctors could treat military personnel and their dependents.

Medical school faculties should now "ask whether we have been properly balancing our obligation to promote social justice with our primary obligation to protect the public interest in an area in which the public cannot protect itself," Dr. Davis said.

In a telephone interview Dr. Davis said that his article was a condensed version of a more detailed report that six Harvard medical school faculty members had signed for purposes of internal debate.

Faculty members at Harvard and other medical schools have had sharp debates over whether the nation's needs are better served by suddenly increasing

the number of black doctors for the black community, even if the standards are lowered, or whether such needs would be better served by a more gradual increase of students with better academic standing.

At the same time, others have debated how many white students with better academic qualifications than the black students should be denied educational opportunities.

In a much-publicized case involving Marco DeFunis Jr., a graduate of the University of Washington who was denied admission to the University of Washington who was denied admission to the university's law school, the United States Supreme Court refused in 1974 to decide whether professional schools may give preference to admitting members of racial minorities at the expense of white applicants.

A spokesman for the Association of American Medical Colleges in Washington said that the organization would withhold comment until its officials had had a chance to read Dr. Davis' article.

The association at one time supported the goal of training black physicians to the point where they made up 12 percent of American doctors. But a year ago the association dropped that policy because the organization had no way to force individual medical schools to accept a specific number of minority group students.

Number Has Increased

The number of blacks enrolled in medical schools has risen almost five times since 1968, when there were 783 in all four classes, to this year, when 3,456 are enrolled. However, the number of fresh-

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Standards Have Dropped Because of Rise in Minority Students

men medical students has dropped from a peak of 1,106 last year to 1,036 this year.

Dr. Davis said that he supported the goal of training more doctors from minority groups but that he objected to "widespread public delusion that these programs are going marvelously—they are not, but the public does not know it."

Dr. Davis added that medical school faculty members who are in a position to screen for medical competence have a responsibility "not to give a medical diploma to a person who might leave a swath of unnecessary deaths behind him."

The problem, Dr. Davis said, has taken on new importance because as medical schools have innovated in the areas of admissions, curriculum, grading and criteria for promotion, some faculties, "no longer confident of their ability to main-

tain adequate minimal standards," have set up external standards by requiring students to pass what are called the National Board Examinations.

Dr. Davis said that the standards for these examinations have been lowered in recent years because the "grades are normalized for each year's population, and so the absolute

norm for passing is necessarily lowered by any nationwide increase in admission of students with substandard academic qualifications."

In questioning how far schools should go in lowering standards, Dr. Davis said: "If a board licensing airline pilots allowed extraneous considerations to interfere with objecti-

vity it would be considered criminal. The temptation to award medical diplomas on a charitable basis raises the same question, even though the consequences of fatal error in the two professions are not equally visible and dramatic."

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